

| POSITION | INITIALS | ID NO. | DATE |
|----------------------------------|----------|--------|----------|
| FEES DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | L | 32 | 5/7 |
| FORMALITY REVIEW | 8/1 | 652 | 05-14-01 |
| RESPONSE FORMALITY REVIEW | 17.5 | 943 | 10-31-1 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1 | ✓ | ✓ | |
| 2 | ✓ | ✓ | |
| 3 | ✓ | ✓ | |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here